

1 Q Nothing that changed your opinion?

2 A No.

3 Q Did you see that this is actually a
4 protocol for inpatients, not the emergency room?

5 A Yes. I don't know if you could say
6 that it's a protocol restricted to inpatients, but I
7 think it's designed more for inpatients. Yes, I
8 think that's accurate.

9 Q So it's not a protocol for the ER?

10 A No. But the same principles would
11 apply.

12 Q Does a respiratory therapist typically
13 see patients in the ER?

14 A The answer to that is yes, if they have
15 one; and yes, a great majority of times if they do
16 have a respiratory therapist.

17 Q I'm going to go to the thing that you
18 actually reviewed. Number 1 on your list is the
19 Willis-Knighton Medical Center -- well, before I go
20 there, is there anything else that you reviewed that
21 is not on your list?

22 A I don't think so -- well, the
23 radiographic studies, the chest X-ray. I did
24 receive the CD of the chest X-ray.

25 Q Do you recall which chest X-rays they

1 A That's a four-year-old, the patient.
2 So the -- you can't really rely on a four-year-old
3 to tell you their asthma attack is resolved. That's
4 what I am saying. The condition has returned to
5 baseline, again, we don't know what the baseline is,
6 and Dr. Easterling didn't know what the baseline
7 was. I don't see how he could.

8 This is a patient with some degree of
9 chronic lung. He doesn't know what the pulmonary
10 function tests show or -- I think he may have seen
11 the patient once before, but as far as returning to
12 the baseline, we don't know what the baseline is.
13 The problem is, again, there is no exam.

14 So you can't determine within a
15 reasonable medical probability that there won't be
16 any material deterioration unless you do an exam,
17 unless you wait for the steroids to work, unless we
18 wait for the tachycardia to resolve; the tachypnea,
19 the rapid respirations to resolve; the pulse
20 oximetry to return to normal on room air.

21 This is a case of status asthmaticus.
22 There was no way that the staff of Willis-Knighton,
23 to include the nurses, if there is a respiratory
24 therapist -- I don't know -- or the doctor can
25 determine that this condition of status asthmaticus